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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/583,705			ing Date 20/2007	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN ALL ENTITY
	FOR	N	UMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1 16(a), (p),	E	N/A		N/A		N/A		ı	N/A	
TO'	FAL CLAIMS CFR 1.16(i))		minus 20 = *			1	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM	IS	minus 3 = *			1	x s =		1	X S =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50	specification and drawings exceed 100 s of paper, the application size fee due 0 (\$125 for small entity) for each onal 50 sheets or fraction thereof. See S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL	
APPLICATION AS AMENDED - PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	06/07/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 6	Minus	20	= 0		X \$26 =	0	OR	X \$ =	
	Independent (37 CFR 1.16(h))	• 2	Minus	3	- 0		X \$110 =	0	OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus	**	-		X \$ =		OR	x s =	
M	Independent (37 CFR 1 16(h))	•	Minus	***	-	l	X \$ =		OR	x s =	
핕	Application Size Fee (37 CFR 1.16(s))					ı			l		
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "O' in column 3.  If the "Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter "20".  If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.  The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the DSFT0 to process) an application Confidentiality is governed by 35 US. of 22 and 37 CFR 1.14. This collection is estimated to beta 21 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chile Information Cliber. U.S. Patient and Trademark Office, U.S. Department of Commons P.O. Box 1469, Alexandria, VA 2231-0. Box 1500, DI NOT SEND FEES OR COMPLETED FORMS TO THIS AUDIESS SEND TO Commissioner for Patients, S.O. Box 1459, Alexandria, VA 2231-3. Box 1500, DI NOT SEND FEES OR COMPLETED FORMS TO THIS